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**Long-term elevation of beta-hydroxybutyrate in dairy cows through  
indusion: effects on feed intake, milk production, and metabolism**

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## Interpretive Summary:

### **Long-term elevation of beta-hydroxybutyrate in dairy cows through infusion: effects on feed intake, milk production, and metabolism.** *By Zarrin et*

*al.* Effects of an induced hyperketonemia for 48 hours on metabolic variables in plasma and liver of mid-lactating dairy cows were studied. Na-DL- $\beta$ -OH-butyrate was infused i.v. to obtain plasma beta-hydroxybutyrate (BHBA) concentration above 1.5 mmol/L comparable to a spontaneous hyperketonemia but not caused by a lack of energy and glucose such as in early lactation. Milk yield and feed intake did not change during BHBA infusion. Plasma glucose concentration decreased during the infusion. Declined glucose concentration could not be explained by alterations of insulin or enzymes related to gluconeogenesis, but is likely functionally related to the observed decrease of plasma glucagon concentration.

## **HYPERKETONEMIA AFFECTS METABOLISM IN DAIRY COWS**

### **Long-term elevation of beta-hydroxybutyrate in dairy cows through infusion: effects on feed intake, milk production, and metabolism**

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## ABSTRACT

Elevation of ketone bodies in dairy cows frequently occurs in early lactation usually concomitantly with a lack of energy and glucose. The objective of the present study was to induce an elevated plasma beta-hydroxybutyrate (BHBA) concentration over 48 hours in mid lactating dairy cows, i.e. during a period of positive energy balance and normal glucose plasma concentrations. Effects of the BHBA infusion on feed intake, metabolism, and performance were investigated. Thirteen cows were randomly assigned to one of two infusion groups, including an intravenous infusion with Na-DL- $\beta$ -OH-butyrate (1.7 mol/L) to achieve a plasma concentration of 1.5 to 2.0 mmol/L of BHBA (HyperB, n=5), or an infusion of 0.9 % saline solution (control, n=8). Blood was sampled before and hourly during the 48 h of infusion. In liver, mRNA transcripts related to gluconeogenesis (pyruvate carboxylase (PC), glucose 6-phosphatase (G6PC), mitochondrial phosphoenolpyruvate carboxykinase (PEPCKm)), Phosphofructokinase (PFKL), pyruvate dehydrogenase complex, and fatty acid synthesis (acetyl-CoA carboxylase (ACoAC), fatty acid synthase (FASN)) were measured by real-time RT-PCR. Glyceraldehyde-3-phosphate dehydrogenase (GAPDH) and ubiquitin were used as housekeeping genes. Changes (difference between before and after 48h infusion) during the infusion period were evaluated by analysis of variance with treatment as fixed effect, and area under the curve (AUC) of variables was calculated on the second day of experiment. The plasma BHBA concentration in HyperB cows was  $1.74 \pm 0.02$  mmol/L

(mean  $\pm$  SE) compared with  $0.59 \pm 0.02$  mmol/L for control cows. The change in feed intake, milk yield and energy corrected milk (ECM) did not differ between the two experimental groups. Infusion of BHBA reduced the plasma glucose concentration ( $3.47 \pm 0.11$  mmol/L) in HyperB compared with control cows ( $4.11 \pm 0.08$  mmol/L). Plasma glucagon concentration in HyperB was lower than the control group. All other variables measured in plasma were not affected by treatment. In the liver, changes in mRNA abundance for the selected genes were similar between two groups. Results demonstrate that intravenous infusion of BHBA decreased plasma glucose concentration in dairy cows but this decrease could not be explained by alterations in insulin concentrations or key enzymes related to gluconeogenesis. Declined glucose concentration is likely functionally related to decreased plasma glucagon concentration.

Key words: dairy cow, ketone bodies, glucose, beta-hydroxybutyrate, metabolism

## INTRODUCTION

High yielding dairy cows need a lot of energy and nutrients for maintenance and milk synthesis in particular during peak lactation. Despite of increased feed intake in the early lactation (Agenäs et al., 2003) after the periparturient nadir, this adaptation cannot cover the requirements during this period. Typical metabolic changes during this period of negative energy balance are low plasma concentrations of glucose, and high concentrations of plasma non-esterified fatty acid (NEFA) and subsequently elevation of ketone bodies (van Dorland et al., 2009; Gross et al., 2011). Although ketone bodies can be used as an alternative fuel for some tissues such as brain and heart (Laffel, 1999; Veech, 2004), kidney (Weidemann and Krebs, 1969), skeletal muscles (Ruderman and Goodman, 1973) and lactating mammary gland (Shaw, 1943), the utilization of ketone bodies is limited. Unused ketone bodies

concentration increase tremendously in blood (Duffield et al., 2009). This elevation of ketone bodies in blood causes reduced feed intake and increases the risk of clinical ketosis (CK), displaced abomasums (DA), metritis and subsequent decrease of milk production (Duffield et al, 2009). The mostly used method to detect of subclinical ketosis is the measurement of BHBA in serum or plasma (Duffield, 2000; Herdt, 2000). In ruminants, BHBA is the major ketone body found in circulation (Bergman, 1971). Ospina et al (2010) suggested a threshold value of 1200  $\mu\text{mol/L}$  to distinguish between normal cows and subclinical ketotic cows.

Subcutaneous BHBA infusion in rats (Langhans et al., 1983; Moor et al., 1976), intraperitoneal BHBA infusion in goats (Rossi et al., 2000), and intracerebroventricular BHBA infusion in dairy cows (Kuhla et al., 2011) lead to inhibited feed intake in these animals. Intravenous BHBA infusion lead to decreased plasma concentration of glucose in dogs (Madison et al., 1964), pigs (Müller et al., 1984), and ewes (Schlumbohm and Harmeyer, 2003, 2004). The reason of declined glucose during the infusion of BHBA remained unclear, but authors suggested that infusion of BHBA induced hypoglycemia through direct or indirect inhibition of gluconeogenesis or by change in insulin concentration in pig and sheep (Müller et al., 1984; Schlumbohm and Harmeyer, 2004). This mechanism has not yet been investigated in dairy cows. Our objective was to induce an elevated plasma BHBA concentration over 48 hours and to investigate its effects on feed intake, performance, and metabolism in the dairy cow. More specifically, this study was carried out to confirm that also in the dairy cow, like in sheep and pig, elevated plasma BHBA concentration affects plasma glucose concentration, and to investigate the underlying mechanisms.

## MATERIAL AND METHODS

### *Animals and Management*

The present trials followed the Swiss Law on Animal Protection and were permitted by the Committee of Animal Experiments of the Canton Fribourg, Switzerland. The study was carried out with 13 diestrus Holstein dairy cows with a parity of  $3.5 \pm 0.10$ , at  $28 \pm 0.3$  (MEAN  $\pm$  SD) weeks in milk. Cows in later lactation were selected to allow the investigation of the specific effect of BHBA infusion without influences of the characteristic endocrine and metabolic changes during the transition period. The cows were healthy at the start of the experiment which was confirmed by a routine blood glutaraldehyde coagulation test (Sandholm, 1976), and by measuring milk somatic cell count (DeLaval cell counter DCC, Switzerland), which had to be less than 150,000 cells/mL in all four quarters.

Two weeks before the start of the experiment, animals were allowed to adapt to tie stall housing and to the experimental feeding conditions. Animals were fed ad libitum with hay. In addition, cows were fed a protein- and energy- rich concentrate (Barley 23.5%, Oats 14.0%, Wheat bran 20.0%, Expeller soybean 17.0%, Linseed meal 15.0%, Salt livestock 0.6%, Carbonate of lime 2.2%, KAF premix 0.4%, Molasses 4.0%, and Alikon 3.0%) twice daily according to each cow's individual extra energy requirement for milk production, and once daily 50 g of minerals. Water was available ad libitum. Milking was performed twice daily at 0530 h and 1600 h.

### ***Experimental design and treatments***

The thirteen cows were randomly assigned to one of two infusion treatments. The treatments included an infusion with BHBA (HyperB, n=5) to obtain a plasma BHBA concentration between 1.5 to 2.0 mmol/L. The control treatment (n=8) included an infusion with a 0.9 % saline solution (NaCl, 20 mL/h). One day before the infusions started, cows were fitted with indwelling intravenous catheters (Cavafix® Certo® Splittocan®, B. Braun Melsung AG, Germany) with a length of 32 cm and a diameter of 16 G in both jugular veins. The infusions through one of the catheters started at 9:00 am and continued until 09:00 am two days later.

The initial infusion rate ( $8.5 \pm 0.6 \mu\text{mol/kg/min}$ ) was determined on the basis of the body weight of each animal and the molarity of the solution followed by instant continued adjustments throughout the 48 h to maintain a plasma BHBA concentration between 1.5 to 2.0 mmol/L by a peristaltic pump (Perpex Jubile pump, H. J. Guldener, Zürich, Switzerland). During the first two hours of BHBA infusion, the blood samples were taken every 15 min to measure the plasma BHBA concentration and adjust the BHBA infusion rate to reach the plasma BHBA concentration between 1.5 and 2.0 mmol/L.

The control cows were treated with 0.9 % saline solution at an infusion rate of 20 mL/h administered using an automatic pump (Perfuser®, B. Braun Melsung AG, Germany).

#### ***Preparation of the BHBA solution***

To achieve a 1.7 M BHBA solution 279.053 g of DL-Beta-hydroxybutyric acid sodium salt (Sigma-Aldrich, H6501) was dissolved in bidistilled water to reach an amount of 1.0 L followed by homogenization using a rotor mixer during 10-20min. The pH of the solution was adjusted with HCl to 7.4 and sterilized at 1 bar and 131°C for 50 min. The solution was filtered through a 0.2 $\mu\text{m}$   $\varnothing$  filter (Millipore Express® PLUS Membrane 45 mm, Millipore, China) and stored at 4°C until infusion.

#### ***Data collection and sampling***

***Feed and milk samples.*** The individual intake of hay was recorded daily for each cow by weighing the amount given and subtracting it by the remainder of hay found the next morning. The milk yield was recorded for each cow individually at every milking during the adaptation and experimental period. Proportional milk samples were taken during milking in the afternoon and in the morning before the start of the experimental infusions. The milk sampling was repeated in the afternoon of day two (32 h after the start of infusion), and at the morning milking at the end of experiment.

152

153 **Blood samples.** One week before the experiment, and immediately before the start of the  
154 experimental infusions on day 1, reference blood samples of each cow were taken from a  
155 jugular vein via vacuum tubes containing tri-potassium-EDTA at 0730 h, after milking and  
156 before feeding. The tubes were kept on wet ice until they were centrifuged for 20 minutes at  
157 3000 x g, and the plasma was obtained. Until the samples were analyzed for concentrations  
158 and activities of plasma variables, the plasma was frozen at -20 °C. After analysis, the mean  
159 value of these samples was calculated and used as reference concentration in the statistical  
160 evaluation. During the experimental infusions blood samples were obtained from the  
161 contralateral jugular catheter, which was not used for the infusion, by using tubes containing  
162 tri-potassium-EDTA. The collected blood samples were partly analyzed immediately for  
163 BHBA concentration (described under laboratory procedures) as a basis for adjustments of the  
164 infusion rate, or were handled similarly as the reference samples.

165

166 **Liver biopsies.** One week before the infusions and 48 h after the start of the infusions,  
167 following the blood sampling, at around 0800 h, a liver biopsy was taken. Liver tissue (60 to  
168 100 mg) was obtained under local anesthesia with 10 mL Lidocain 2% (Streuli Pharma AG,  
169 Uznach) by blind liver puncture with a 14 G and 150 mm or 200 mm long biopsy needle (Tru-  
170 Cut, Provet AG, Lyssach, Switzerland). The samples were placed directly into RNA  
171 stabilization reagent (RNAlater<sup>®</sup>, Ambion, Applied Biosystems, Austin, TX), kept at +5 °C  
172 for 24 hours and thereafter stored at -80 °C until RNA extraction.

173

#### 174 **Laboratory procedures**

175 **Feed and milk.** The nutritional composition of hay (DM content, 890g/kg of fresh matter  
176 (FM); on DM basis, consisting of 153 g of CP/kg, 235.0 g of Crude fiber/kg, and 5.7 MJ of  
177 NE<sub>L</sub>/kg) and concentrate (DM content, 881 g/kg of FM; on DM basis, consisting of 217 g of



CP/kg, 73.9 g of Crude fiber/kg, and 7.6 MJ of NE<sub>L</sub>/kg) were determined by using routine analyses as described by van Dorland et al. (2009). The nutritive energy balance was calculated as the difference between the energy intake, and the energy output (NE<sub>L</sub>, requirements for maintenance and milk production, determined from tabulated values and recommended equations according as to van Dorland et al. (2009)).

Milk samples were analyzed at the laboratory of the Holstein Association of Switzerland, Grangeneuve, Switzerland, for their content of fat, protein, lactose and urea (CombiFoss 6000, Gerber Instrument AG, Effretikon, Switzerland). The ECM was calculated based on Sjaunja et al. (1991), using the formula: ECM (kg/d) = [(0.038 × Fat (g/kg) + 0.024 × Protein (g/kg) + 0.017 × Lactose (g/kg)) × Milk Yield (kg/d)] / 3.14

**Blood plasma.** Plasma metabolites were measured enzymatically with an automated analyzer (Cobas Mira 2, Hoffmann-La Roche, Basle, Switzerland) by the use of commercial kits as described by van Dorland et al. (2009) and Kreipe et al. (2011). Plasma insulin and insulin-like growth factor-1 (IGF-1) were measured by RIA as described by Vicari et al. (2008) and total cortisol was measured by RIA as described by Blum et al. (1985). Plasma glucagon concentration was measured by using a RIA kit (cat. # GL-32K, MILLIPORE, Zug, Switzerland).

**Liver tissue.** Total mRNA was extracted from liver samples using peqGOLD TriFast™ (PEQLAB Biotechnologie GmbH, Erlangen, Germany) according to manufacturer's protocol, and afterwards quantity and purity were determined by absorbance at 260 nm and 280 nm using a NanoDrop ND-2000 spectrophotometer (NanoDrop Technologies Inc., Wilmington, DE). Subsequently, one µg of total mRNA was reverse transcribed with 200 U Moloney Murine Leukemia Virus Reverse Transcriptase RNAase H Minus, Point Mutant (Promega Corporation, Madison, WI) using 100 pmol random hexamer primers (Invitrogen, Leek, The

Netherlands). A master mix containing the following components was prepared: 0.8 µL PCR water, 1.0 µL forward primer (5 pmol), 1.0 µL reverse primer (5 pmol), 5.2 µL 2x SensiMix plus SYBR-Green (1 mM MgCl<sub>2</sub>). The selected and measured genes encoding for hepatic enzymes involved in gluconeogenesis, glycolysis, fatty acid oxidation, citrate synthase, fatty acid and triglyceride synthesis, cholesterol synthesis, pyruvate dehydrogenase complex, and ketogenesis, are shown in Table 1. The primer sequences for PC and PEPCKm were according to Hammon et al. (2003), FASN, acyl-CoA synthetase long-chain (**ASCL**), carnitine palmitoyltransferase 1A (**CPT1A**), and citrate synthase (**CS**) were according to van Dorland et al. (2009), ACoC, carnitine palmitoyltransferase 2 (**CPT2**), G6PC, and 3- hydroxyl-3 – methylglutaryl-coenzyme A synthase 1 (**HMGCS1**), according to Graber et al. (2010). Lactate dehydrogenase A (**LDHA**), lactate dehydrogenase B (**LDHB**), PFKL, dihydrolipoamide branched chain transacylase E2 (**DBT**), dihydrolipoamide dehydrogenase (**DLD**), pyruvatedehydrogenase (lipomide) alpha 1 (**PDHA1**), glucagon receptor (**GCGR**), glycogen synthase 2 (**GYS2**), and protein kinase, AMP- activated alpha 1 (**PRKAA1**) primers were designed to amplify cDNA.

The PCR quantification was performed by using a Rotor-Gene™ 6000 (Corbett Research, Sydney, Australia), using the software version 1.7.40. Fluorescence take off was calculated with the “threshold” program option. Eight µL of master-mix and two µL sample volume, containing 20 ng of cDNA, were used. The following three-step PCR program was performed: denaturation for 10 min at 95 °C, 40 cycles of amplification (each consisting of 15 s at 95 °C, the primer-specific annealing temperature for 30 s (Graber et al., 2010; Pfaffl et al., 2002), and extension at 72 °C for 20 s and quantification of fluorescence, and finally a melting curve program (60 to 95 °C). The mRNA levels were calculated relative to the mean expression level of the housekeeping genes GAPDH and ubiquitin, which were stable across time points as described by Kreipe et al (2011).

### ***Statistical analysis***

Prior to data analysis, for each variable (gene expression, plasma metabolites, feed intake, milk yield, and ECM), the change (delta) was calculated by subtracting the value measured after the infusion treatments from the value measured before the infusion treatments. The delta for each variable (difference between before and after 48h infusion) was statistically evaluated using the general linear models (GLM) procedure of SAS (SAS Institute Inc., Cary, NC, USA, 2002-2008, Release 9.2), including treatment (BHBA or NaCl) as fixed effect. Differences between means were determined by the Tukey test. In addition, means of delta values obtained within each treatment were tested for their difference from “0”. Furthermore, blood plasma variables, the area under the curve (AUC) was calculated for day 2 (d2) of the treatments, and subsequently assessed statistically with the model as described above. Data obtained prior to the treatment were included as covariate in the model to compensate for initial differences between individuals.

Data are presented as means  $\pm$  SEM and differences were considered significant if  $P < 0.05$ , and as a trend if  $P < 0.10$ .

## **RESULTS**

### ***Infusion rates and plasma concentrations of BHBA***

The mean infusion rate of BHBA over 48 h was  $8.5 \pm 0.6$   $\mu\text{mol/kg/min}$  (Figure1). The mean plasma BHBA concentration reached and maintained was  $1.7 \pm 0.1$  mmol/L for 48 h.

The infusion of BHBA resulted in a marked increase in plasma BHBA concentration in HyperB cows ( $P < 0.001$ ). Plasma BHBA concentration in control cows remained unchanged. Consequently, larger AUC was observed (Table 2) for plasma BHBA concentration in HyperB ( $1.74 \pm 0.02$  mmol/L, mean  $\pm$  SEM) cows compared with the control cows ( $0.59 \pm 0.02$  mmol/L) on d2 ( $P < 0.001$ ).

### ***Feed intake, energy balance, and ECM***

Dry matter intake (DMI) of hay and concentrate prior to the infusions (d0) is shown in table 3. On day 1 of the infusions, DMI of hay and concentrate was  $19.1 \pm 0.4$  kg/d, and  $16.9 \pm 1.9$  kg/d, for HyperB, and control cows, respectively. On day 2 of the infusions, DMI of hay and concentrate was  $19.0 \pm 0.9$  kg/d, and  $17.9 \pm 1.0$  kg/d, for HyperB, and control cows, respectively. The DMI was not affected by BHBA infusion. The nutritive energy balance was remained unaffected by HyperB and similar in both groups across the study period. The change from d0 to d2 (delta), was  $-1.04 \pm 8.67$  MJ/d, and  $1.72 \pm 4.9$  MJ/d for HyperB and control cows, respectively. Milk yield and ECM were not affected by BHBA infusion.

### ***Blood metabolites and enzymes***

Plasma glucose concentration in HyperB cows decreased ( $P = 0.03$ , Table 4) and was lower compared with control group on d2 ( $P = 0.0012$ , Table 2) (Figure 2). Beta-hydroxybutyrate infusion decreased the plasma glucagon concentration on day 2 ( $P = 0.03$ ) (Figure 3). Plasma concentrations of NEFA, IGF-1, Urea, triglyceride (TG), Cortisol, and Insulin (Figure 4) remained unchanged in both HyperB and control groups during the course of infusion. The plasma Urea, IGF-1, and TG decreased within control group, and the plasma glucose and urea decreased within HyperB group.

### ***Liver gene expression***

The mRNA abundance in liver of the most studied variables did not differ between treatments (Table 5). Beta-hydroxybutyrate infusion affected on mRNA abundance of PRKAA1, and it tended to lower in HyperB group than the control group ( $P=0.08$ ). The mRNA abundance of PC increase and that of PDHA1, and HMGCS1 decreased ( $P<0.05$ ) over time within the

control cows. In the HyperB group the mRNA abundance of HMGCS1 decreased significantly over time.

## DISCUSSION

Our objective was to induce an elevated plasma concentration of BHBA without the metabolic situation as observed during the early lactation, to solely investigate the effect of BHBA on feed intake, milk yield, and metabolism. This study is to the best of our knowledge the first one that induced an elevated plasma BHBA concentration for 48 h in dairy cows by infusion of BHBA. Plasma BHBA concentration reached was  $1.7 \pm 0.1$  mmol/L, which was clearly above the mostly considered concentration of 1.2 to 1.4 mmol/L referring to subclinical ketosis (Duffield et al., 2009; Ospina et al., 2010).

The expected reduction of DMI in HyperB cows as shown in cows with spontaneously elevated ketone body concentrations (Bareille et al., 2003; Gonzàlez et al., 2008) was not observed in our study. Subcutaneous injection of BHBA (10 mmol/kg body weight) in rats (Langhans et al., 1983; Moor et al., 1976), intraperitoneally BHBA infusion (15 mmol/kg<sup>0.75</sup>) in pigmy goats (Rossi et al., 2000), and intracerebroventricular BHBA infusion (18mM/d) in dairy cow (Kohla, 2011) decreased feed intake. Beta-hydroxybutyrate can play a role in regulation of feed intake (Langhans, 1983). In an *in vitro* experiment, elevation of BHBA: glucose ratio to 1:1 in early lactation compare with non-ketotic cows with a 1:4 ratio, can decrease feed intake via stimulation of dephosphorylation of AMPK after parturition (Laeger et al, 2012). In our study, BHBA infusion did not affect feed intake throughout the experiment which may relate to low ratio of BHBA: glucose.

During the experiment plasma glucose concentration decreased dramatically due to the infusion of BHBA. This finding is consistent with other reports of decreased plasma glucose concentration associated with elevated BHBA in pregnant sheep (Schlumbohm and Harmyer

2003, 2004), dogs (Madison et al., 1964; Felts et al., 1964), and pigs (Müller et al, 1984). However, our findings are in contrast to other reports that described a hyperglycemia in rabbits (Mirsky and Broh- Kahn, 1937; Caccuri, 1937) induced by ketone bodies infusion.

Information about the reasons for decreased plasma glucose concentration due to the elevated BHBA concentration is limited. Hypothetically, insulin plays a role in this effect. Infusion of BHBA increases insulin secretion in pigs (Müller 1984). Madison et al (1964) suggested that pancreatic beta cells respond to the high plasma BHBA concentration with increased insulin secretion in dogs. It appears that insulin suppresses the glucose production throughout an inhibitory effect on the regulatory enzymes of gluconeogenesis (Hayirli, 2006; Brockman and Larveld, 1986). This release of endogenous insulin can lead to decline in plasma glucose concentration, and reduce the hepatic glucose production. The unchanged insulin concentration in response to the BHBA infusion in the present study may be explained by the fact that ketone bodies represent only a modest stimulus on insulin secretion in ruminant (Jordan and Philips, 1978; Heitman and Fernandez, 1986). Insulin did obviously not play a significant role in mediating the lowering effect of BHBA on plasma glucose concentration in sheep (Schlumbohm and Harnmyer 2003). Decreased glucose concentration and hepatic glucose output due to the infusion of BHBA can reduce the availability of glucose for the peripheral tissues because exhausted glucose stores must be replaced by a catabolism of proteins during emergency conditions for the vital tissues such as central nervous system (Madison et al., 1964). The molarity of ketone bodies in plasma are the same or higher than that of glucose. Thus, enhanced plasma BHBA concentration can increase the efficiency of BHBA as a competitor to glucose used by peripheral tissues and has been shown to inhibit peripheral glucose utilization (Madison et al., 1964). Ketone bodies are a preferred energy source by body tissues compared to glucose, because 100 g of BHBA produces 10.5 kg ATP whereas 100 g glucose produces 8.7 kg ATP (Salway 1999). Mebane et al (1962)

331 demonstrated that ketone body infusion leads to a 30% reduction in glucose utilization by  
332 peripheral tissues. Previous studies also reported that the oxidation of glucose was inhibited  
333 by ketone body infusion (Neptune et al., 1961; Williamson and Krebs, 1961). In contrast, as  
334 above mentioned Schlumbohm and Harmyer (2004) suggested that BHBA infusion decreased  
335 endogenous glucose production but did not affect glucose utilization in pregnant sheep.  
336 Furthermore they suggested that the elevated concentration of ketone bodies in blood initially  
337 decline glucose production via the depressed signal on hepatic gluconeogenesis in liver.

338 In contrast to a previous study that found increased glucagon concentrations after BHBA  
339 infusion in pigs (Müller 1984), in our study BHBA infusion decreased glucagon concentration  
340 in HyperB compared with the control group. Plasma glucose is derived from the feed,  
341 glycogen, and by gluconeogenesis, and it is regulated by several hormones, mainly glucagon  
342 and insulin. Glucagon increases plasma glucose concentration through stimulation of  
343 gluconeogenesis and glycogenolysis (Aronoff et al, 2004; Grald and Taborsky, 2010). Change  
344 in glucagon secretion from the physiological range results in changes of plasma glucose  
345 concentration (Grald and Taborsky, 2010). Some substrates such as NEFA and ketone bodies  
346 suppress glucagon secretion (Gerich et al., 1974; Gerich et al., 1976; Goberna et al., 1974).  
347 There is evidence that glucagon secretion is inhibited by the neighboring  $\beta$ - cell through  
348 insulin (Weir et al, 1976) and gamma amino butyric acid (GABA) (Adeghate et al., 2000;  
349 Wendt et al., 2004). Gamma amino butyric acid is an inhibitory neurotransmitter in the brain.  
350 In an in vitro study it was demonstrated that BHBA increase GABA concentration in the  
351 epileptic brain (Suzuki et al., 2009). We suspect that the decrease in glucagon concentration in  
352 our study is related to elevated BHBA concentration as BHBA is used as an alternative fuel  
353 and energy source for the tissues, or glucagon secretion was prevented by the GABA  
354 inhibitory effect. Subsequently a decline of glucagon secretion decreased glucose production  
355 through the effect on glycogenolysis or gluconeogenesis during the experiment.

We have expected a decrease of plasma NEFA concentration in response to the BHBA infusion and a subsequent increase of insulin (Madison et al., 1964), both variables did not change during the experimental period.

Beta-hydroxybutyrate can replace glucose to be utilized in peripheral tissues (Madison et al., 1964), and this can help to decline fatty acid mobilization from adipose tissues. On the other hand after a decline in glucose concentration and subsequently NEB, enhance of NEFA occurred in early lactation (van Dorland et al., 2009), but in this study despite of decreased glucose, cows were not in the NEB situation. Although liver is the main site to produce ketone bodies from fatty acid oxidation, it cannot utilize the ketone bodies for the synthesis of acetoacetyl CoA and subsequently fatty acids due to a lack of the Succinyl-CoA:3-ketoacid-coenzyme A transferase 1, mitochondrial (OXCT1), (Goodridge and Sul., 2000).

#### ***Effects of BHBA infusion on hepatic gene expression***

Our results of mRNA abundance of key enzymes related to hepatic gluconeogenesis (pyruvate carboxylase, glucose-6-phosphatase, mitochondrial phosphoenolpyruvate carboxykinase) are in contrast with suggestions from previous studies that indicated an inhibition of gluconeogenesis by elevated plasma BHBA concentration (Schlumbohm and Harmyer, 2003; Müller 1984). Müller et al (1984) suggested that ketone bodies probably have a direct inhibitory action on gluconeogenesis. They mentioned that the effect of ketone bodies on endogenous glucose production is probably mediated by insulin. However, in ruminants the effect of ketone bodies on insulin secretion is not strong (Jordan and Philips, 1978; Heitman and Fernandez, 1986), and insulin concentration did not change in our study. Soling and Kleineke (1976) suggested that ketone bodies have a glucose sparing effect in tissues through mitochondrial formation of citrate, an allosteric inhibitor, phosphofructo-1,6-kinase, acetyl-CoA inhibition of pyruvate dehydrogenase and activation of pyruvate carboxylase. Beta-hydroxybutyrate infusion did not affect on key enzymes related to gluconeogenesis, glycolysis,



pyruvate dehydrogenase complex (PDH complex), and citrate synthase mRNA expression. According to the mRNA abundance of some enzymes related to fatty acid oxidation, BHBA infusion did not affect fatty acid oxidation. These results are not in agreement with previous reports (Soling and Kleineke, 1976; Morio and Wolfe, 2005) that mentioned ketone bodies are an inhibitor for fatty acid oxidation through increase acetyl CoA production, inhibit CPT1 activity, and stimulate malonyl CoA synthesis.

As mentioned above ketone bodies suppressed the glucagon secretion, and this inhibition could have been regulated via cAMP. The mechanism of this inhibition is related to the generation of ATP/ADP by substrate such as ketone bodies, then decrease of cAMP and finally prevention of glucagon secretion (Gerich et al., 1976; Toyota et al., 1975; Mitrakou et al., 1991; Adeghate et al., 2000). In the present study, the PRKAA1 expression tended to decrease in HyperB compared with control group ( $P<0.1$ ). On the other hand, BHBA infusion decreased the PRKAA1 expression, subsequently glucagon excretion was decreased.

## CONCLUSION

Results from this study demonstrate that intravenous BHBA infusion successfully induced elevated plasma BHBA concentration for a long term (48 h) in dairy cows. Based on this study feed intake is not affected by elevated BHBA concentration during a period positive energy balance. Decreased plasma glucose concentration during BHBA administration cannot be related to changes of insulin concentration or to mRNA abundance of genes related to hepatic gluconeogenesis, fatty acid synthesis, citrate synthase, pyruvate dehydrogenase complex, and glycolysis. Although mRNA expression indicated high activity of enzyme production, the effects of BHBA infusion occurred most likely at a post-transcriptional level. Reduced glucose concentration maybe related to decrease in plasma glucagon concentration

which can decrease glucose production from gluconeogenesis or glycogen storage. Thus BHBA seems to have a glucose sparing effect. However, glucose entry rate was probably reduced by the treatment, and additional studies will be necessary to clarify the underlying mechanisms.

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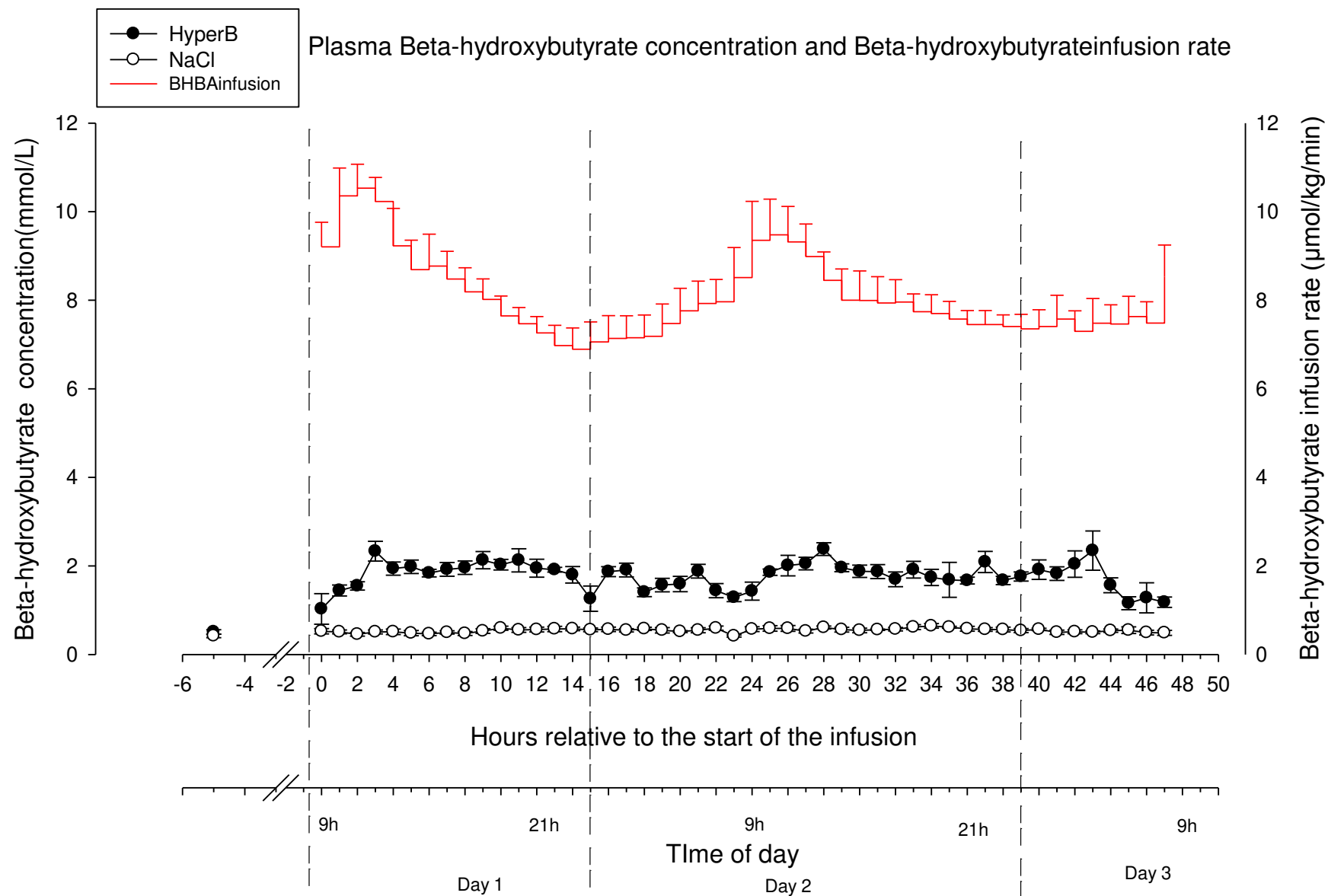
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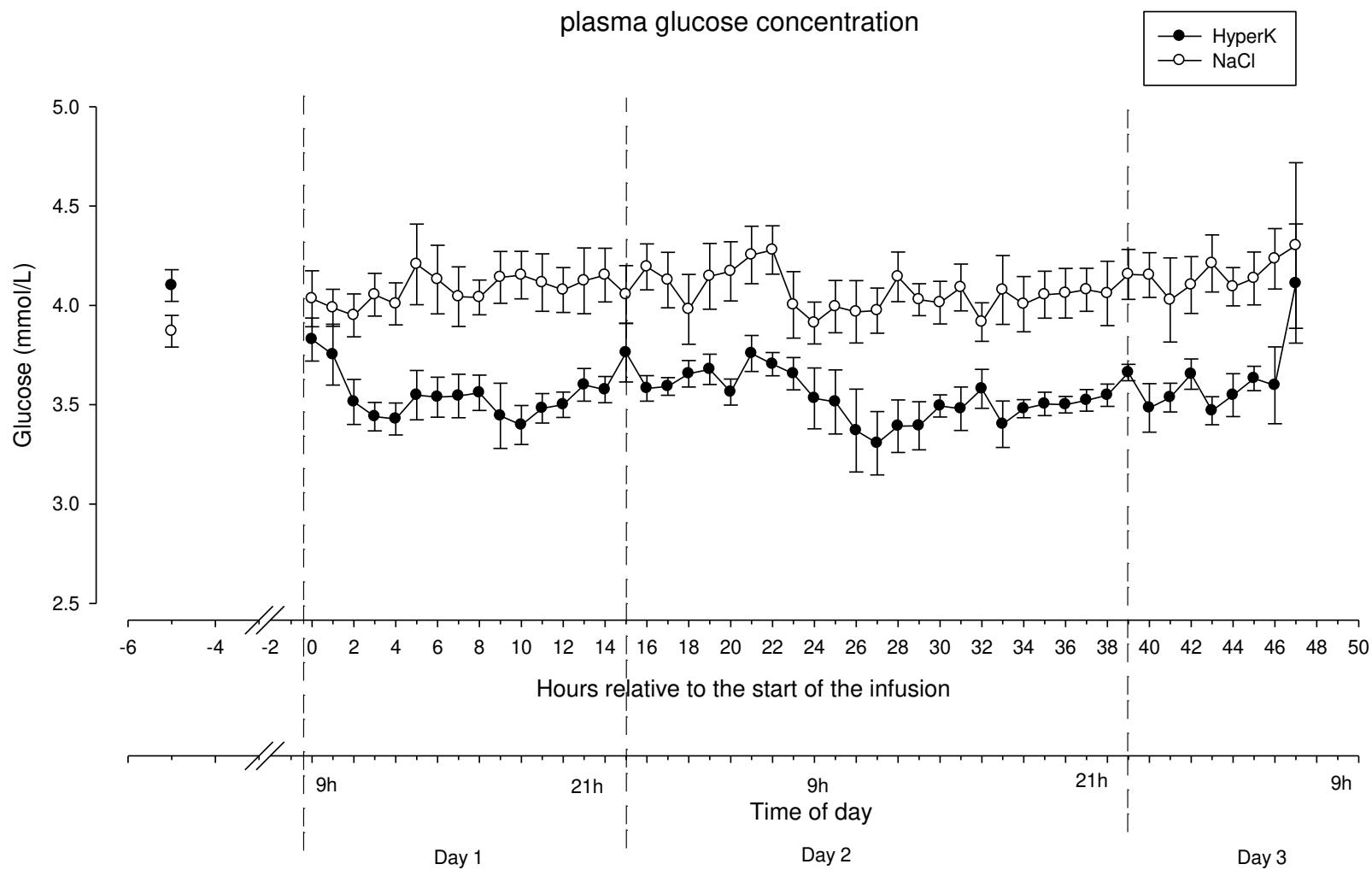


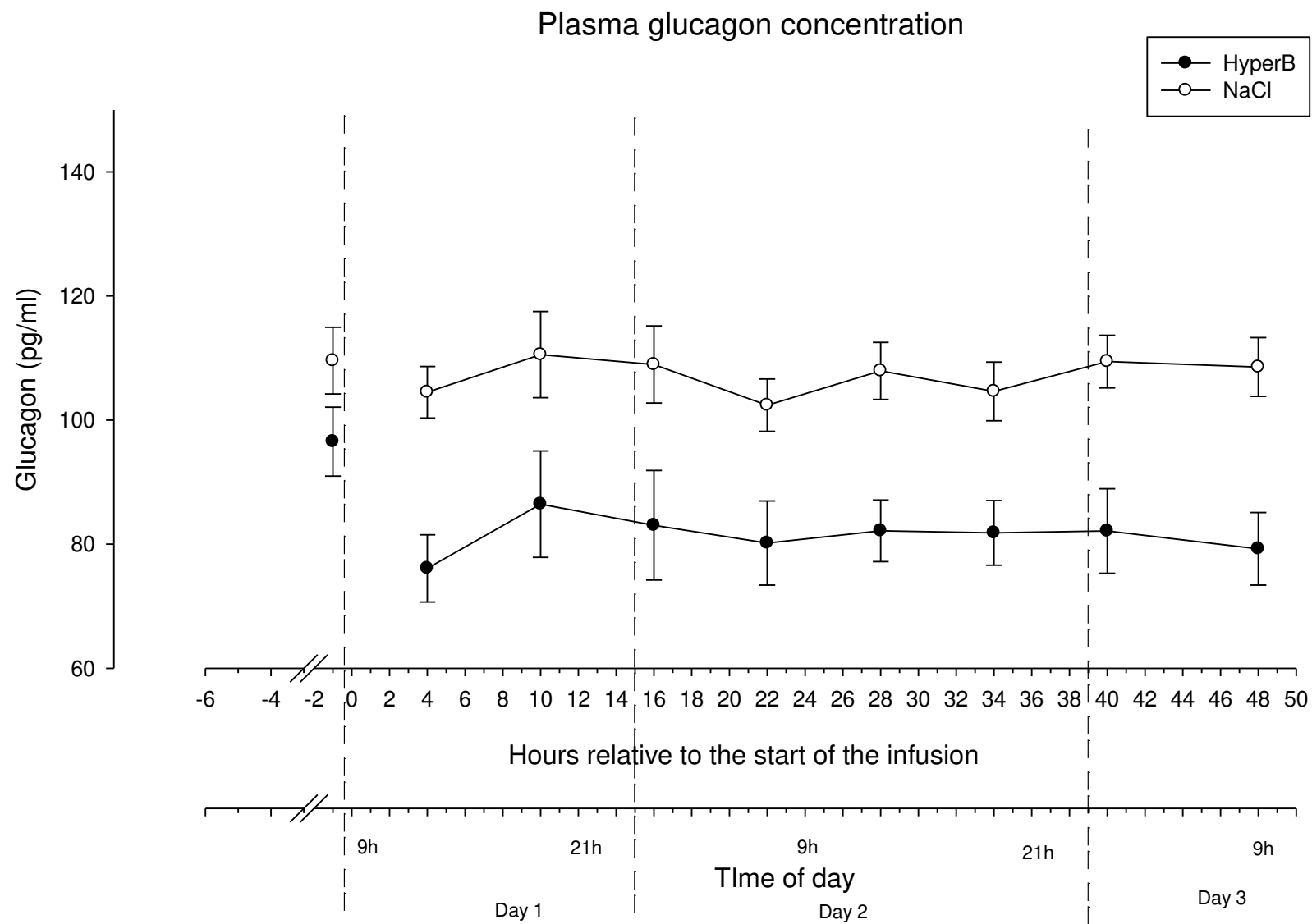
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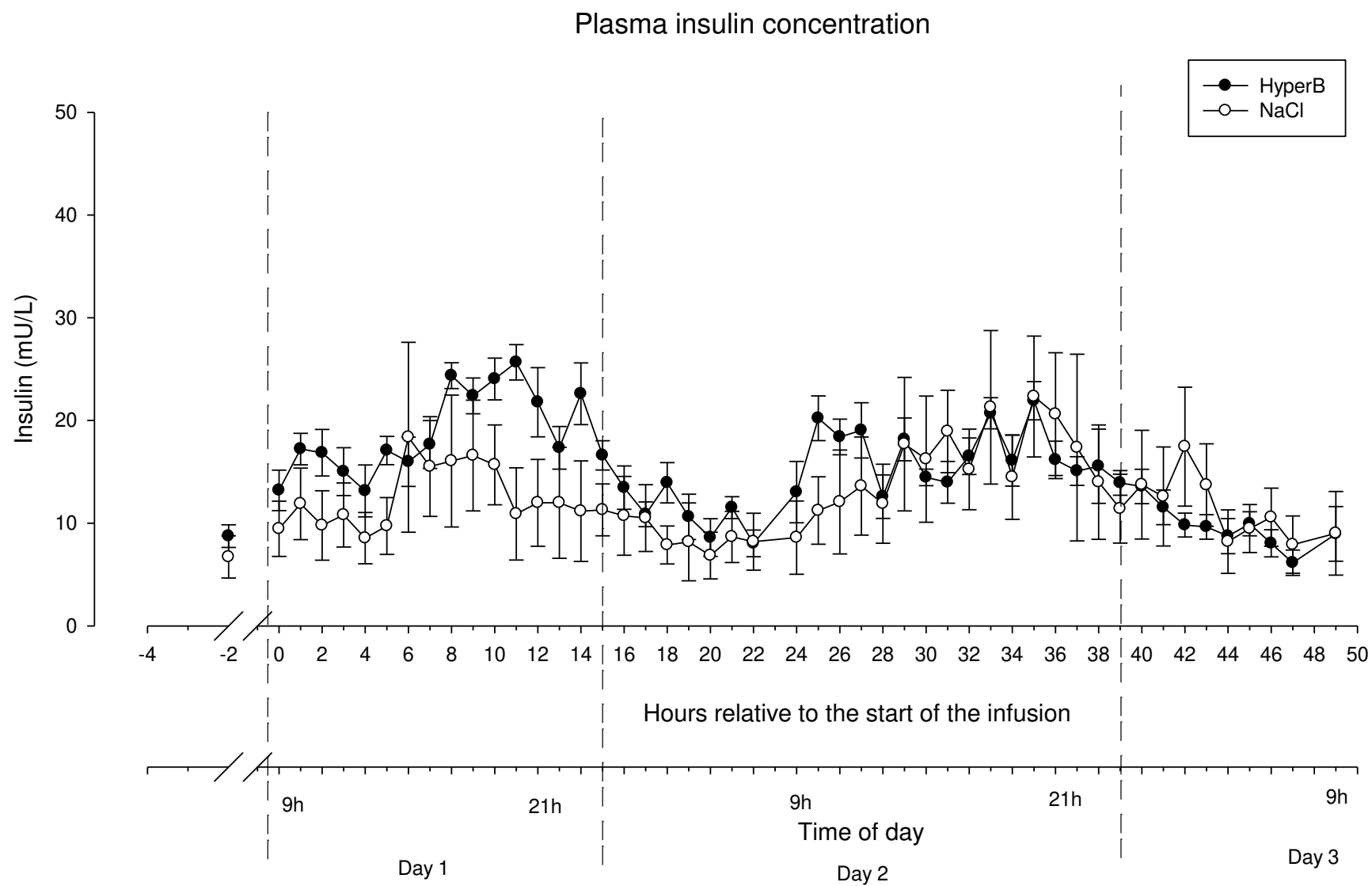
- Figure 1. Beta-hydroxybutyrate (BHBA) infusion rate during 48 h infusion in BHBA cows (HyperB). Plasma BHBA concentration in control cows and cows infused with BHBA before the start of the infusion (d0) and during 48 h infusion. Values represent Mean  $\pm$  SEM.
- Figure 2. Plasma glucose concentration in control cows and cows infused with BHBA before the start of the infusion (d0) and during 48 h infusion. Values represent Mean  $\pm$  SEM.
- Figure 3. Plasma glucagon concentration in control cows and cows infused with BHBA before the start of the infusion (d0) and during 48 h infusion. Values represent Mean  $\pm$  SEM.
- Figure 4. Plasma insulin concentration in control cows and cows infused with BHBA before the start of the infusion (d0) and during 48 h infusion. Values represent Mean  $\pm$  SEM.



JDS-12-6224, Figure 1







**Table 1.** Polymerase chain reaction primer information (for = forward, rev = reverse), annealing temperature and the PCR product length

Gene <sup>1</sup>		Sequence 5'-3'	Gene Bank accession no.	Annealing temperature (°C)	Length, bp
<i>Gluconeogenesis related variables</i>					
G6PC	for rev	GCCAACCTACAGATTTTCGGTG CAATGCCTGACAAGACTCCAG	NM-001076124	58	140
PC	for rev	ATCTCCTACACGGGTGACGT TGTCGTGGGTGTGGATGTGCA	NM_177946	60	214
PEPCKm	for rev	TACGAGGCCTTCAACTGGCGT AGATCCAAGGCGCCTTCCTTA	XM_583200	60	365
<i>Phosphofructokinase ,liver and lactate dehydrogenase</i>					
LDHA	for rev	CGGTTACAAACAAGTGGTTG GAGACCCTTAATCATGGTGG	NM-174099	60	166
LDHB	for rev	CAGCATTCTGGGAAAGTCTC GAGTAATCTTTGTCTGCCAC	NM-174100	60	141
PFKL	for rev	TTGACTGCAGGACCAACGTC GCAGCTTCTCCGACATCCAG	NM-001080244	60	120
<i>Glucagon receptor, glycogen synthase, protein kinase, AMP- activated alpha 1</i>					
GCGR	for rev	TCCCAGTGTGATGGATGA CTTGAGCATGAAGGACACGA	NM-001192414	60	207
GYS2	for rev	AAACTTCCTGCTGAGGATGC GAATGTGCAGTGTCCCATAG	NM-001192905	58	138
PRKAA1	for rev	AAACTGTACCAGGTCATCAG GAAATTACTTCTGGTGCAGC	NM-001109802	58	326
<i>Pyruvate dehydrogenase complex variables</i>					
DBT	for rev	GTCGCCTTGCAATGGAAAAC GTGAAAGCCTTTCACGGGTTC	NM-173905	60	248
DLD	for rev	TGGTCAAGAGAGGCCATTTT AACTGGGCAGCTTTAATAGC	NM-001206170	60	16
PDHA1	for rev	ACACAGCATGAGTGATCCTG CTTCAACACTGGCGAGATTG	NM-001101046	60	127
<i>Fatty acid and cholesterol synthesis related variables</i>					
ACOAC	for rev	CTCTTCCGACAGGTTCAAGC ACCATCCTGGCAAGTTTCAC	AJ-132890	61	248
FASN	for rev	CTGAGTCGGAGAACCTGGAG ACAATGGCCTCGTAGGTGAC	NM_001012669	63	232
HMGCS1	for rev	TGTACGGCTCCCTGGCTTCTG CATGTTCCCTTCGAAGAGGGAATC	BC-102850	60	313
<i>Fatty acid oxidation related variables</i>					
ACSL1	for rev	TGACTGTTGCTGGAGACTGG CAGCCGTCTTTATCCAGAGC	NM-001076085	61	199
CPT1	for rev	CAAAACCATGTTGTACAGCTTCCA GCTTCCTTCATCAGAGGCTTCA	BF039285	54	111
CPT2	for rev	CAGCCTGCCCAGGCTGCCTAT AGTGACCAGCTGCTCATGCA	BC105423	60	163

<i>Citrate synthase, and ketogenesis related variables</i>					
CS	for	TGGACATGATGTATGGTGG	BC-114138	60	217
	rev	AGCCAAGATACCTGTTTCCTC			
HMGCS2	for	TCTGGCCCCATCACTCTGCC	NM-001045883	60	126
	rev	AGTGGGGAGCCTGGAGAAGC			

<sup>1</sup>ACoAC = acetyl-CoA carboxylase; ACSL1 = acyl-CoA synthetase long-chain; CPT1A = carnitine palmitoyltransferase 1A; CPT2 = carnitine palmitoyltransferase 2; CS = citrate synthase; DBT = dihydrolipoamide branched chain transacylase E2; DLD = Dihydrolipoamide dehydrogenase; FASN= fatty acid synthase; G6PC = glucose-6-phosphatase; GCGR= glucagon receptor; GYS2= glycogen synthase 2; HMGCS1 = 3- hydroxyl-3 – methylglutaryl-coenzyme A synthase 1; HMGCS2 = 3- hydroxyl-3 – methylglutaryl-coenzyme A synthase 2 ; LDHA = lactate dehydrogenase A; LDHB = lactate dehydrogenase B; PC = pyruvate carboxylase; PDHA1 = pyruvatedehydrogenase (lipomide) alpha 1; PEPCKm = mitochondrial phosphoenolpyruvate carboxykinase; PFKL = phosphofructokinase,liver; PPKA1= protein kinase, AMP- activated alpha 1.

**Table 2.** Least square means  $\pm$  SEM of area under the curve (AUC) Plasma variables concentration in dairy cows infused with beta-hydroxybutyrate (HyperB) or saline (NaCl) on day 2.

Variable <sup>1</sup>	Group <sup>2</sup>	LSMeans $\pm$ SEM day 2			ANOVA ( <i>P</i> -Value, group)
Glucose, mmol/L	HyperB	3.47	$\pm$	0.11	< 0.01
	NaCl	4.11	$\pm$	0.08	
INS, mU/L	HyperB	12.7	$\pm$	1.4	0.54
	NaCl	13.9	$\pm$	1.1	
BHBA, mmol/L	HyperB	1.74	$\pm$	0.02	< 0.001
	NaCl	0.59	$\pm$	0.02	
NEFA, mmol/L	HyperB	0.06	$\pm$	0.03	0.51
	NaCl	0.09	$\pm$	0.02	
Urea, mmol/L	HyperB	3.77	$\pm$	0.31	0.63
	NaCl	3.97	$\pm$	0.24	
Glucagon, pg/ml	HyperB	97.4	$\pm$	3.3	< 0.05
	NaCl	107.7	$\pm$	2.6	
IGF-1, ng/mL	HyperB	90	$\pm$	4.5	0.11
	NaCl	80	$\pm$	3.6	
TG, mmol/L	HyperB	0.15	$\pm$	0.01	0.58
	NaCl	0.14	$\pm$	0.01	
Cortisol, ng/mL	HyperB	2.41	$\pm$	0.55	0.78
	NaCl	2.62	$\pm$	0.43	

<sup>1</sup>BHBA= Beta-hydroxybutyrate; INS= Insulin; NEFA= non-esterified fatty acids; IGF-1= Insulin Growth Factor-1; TG= Triglyceride

<sup>2</sup>HyperB= Hyper beta hydroxybutyrate group; NaCl= group of cows receiving physiological saline solution



**Table 3.** Milk yield, ECM, DMI, and Energy balance of dairy cows infused with beta-hydroxybutyrate (HyperB) or saline (NaCl) before the start of the infusion (d0) and difference (delta: d2-d0) between before and after 48h infusion(d2). Values represent Mean  $\pm$  SEM.

Variable <sup>1</sup>	Group <sup>2</sup>	d0	Delta d2-d0	ANOVA ( <i>P</i> -Value, group)
Milk yield, Kg/day	HyperB	23.31 $\pm$ 0.78	-3.30 $\pm$ 1.43*	0.3
	NaCl	21.78 $\pm$ 2.53	-1.76 $\pm$ 0.68	
ECM, Kg/day	HyperB	21.00 $\pm$ 0.28	-1.58 $\pm$ 0.76	0.79
	NaCl	21.95 $\pm$ 2.58	-1.21 $\pm$ 0.85	
DMI, Kg/day	HyperB	19.82 $\pm$ 0.66	-0.80 $\pm$ 1.22	0.76
	NaCl	18.33 $\pm$ 1.28	-0.38 $\pm$ 0.76	
EB, MJ/d	HyperB	15.04 $\pm$ 2.18	-1.04 $\pm$ 8.67	0.77
	NaCl	1.67 $\pm$ 4.90	1.72 $\pm$ 4.90	

<sup>1</sup> DMI= dry matter intake; ECM= energy corrected milk; EB= energy balance;

<sup>2</sup> HyperB= Hyper beta-hydroxybutyrate group; NaCl= cow group receiving physiological saline solution

\*Delta is different from 0 ( $P < 0.05$ )

**Table 4.** Plasma variables concentrations in dairy cows infused with beta-hydroxybutyrate (HyperB) or saline (NaCl) before the start of the infusion (d0) and difference (delta: d2-d0) between before and after 48h infusion (d2). Values represent Mean  $\pm$  SEM.

Variable <sup>1</sup>	Group <sup>2</sup>	d0	Delta d2-d0	ANOVA ( <i>P</i> -Value, group)
Glucose, mmol/L	HyperB	4.10 $\pm$ 0.08	-0.46 $\pm$ 0.18*	< 0.05
	NaCl	3.87 $\pm$ 0.08	0.10 $\pm$ 0.14	
INS, mU/L	HyperB	8.74 $\pm$ 0.78	-1.56 $\pm$ 0.92	0.30
	NaCl	6.78 $\pm$ 1.62	0.14 $\pm$ 1.08	
BHBA, mmol/L	HyperB	0.51 $\pm$ 0.05	0.74 $\pm$ 0.15*	< 0.001
	NaCl	0.42 $\pm$ 0.04	0.09 $\pm$ 0.05	
NEFA, mmol/L	HyperB	0.11 $\pm$ 0.02	-0.02 $\pm$ 0.02	0.7
	NaCl	0.16 $\pm$ 0.03	-0.04 $\pm$ 0.04	
Urea, mmol/L	HyperB	4.73 $\pm$ 0.34	-1.25 $\pm$ 0.3*	0.73
	NaCl	5.0 $\pm$ 0.26	-1.05 $\pm$ 0.4*	
IGF-1, ng/mL	HyperB	91 $\pm$ 6.1	-6.65 $\pm$ 2.5	0.55
	NaCl	100 $\pm$ 10.0	-9.87 $\pm$ 3.7*	
Glucagon, pg/ml	HyperB	115.2 $\pm$ 19.1	-17.3 $\pm$ 1.3*	0.06
	NaCl	109.6 $\pm$ 5.4	-1.0 $\pm$ 6.1	
TG, mmol/L	HyperB	0.18 $\pm$ 0.01	-0.02 $\pm$ 0.01	0.91
	NaCl	0.16 $\pm$ 0.01	-0.02 $\pm$ 0.01*	
Cortisol, ng/mL	HyperB	5.74 $\pm$ 1.4	-2.37 $\pm$ 1.9	0.67
	NaCl	2.92 $\pm$ 0.8	-1.56 $\pm$ 0.9	

<sup>1</sup>BHBA= Beta-hydroxybutyrate; INS= Insulin; NEFA= non-esterified fatty acids; IGF-1= Insulin Growth Factor-1; TG= Triglyceride

<sup>2</sup>HyperB= Hyper beta-hydroxybutyrate group; NaCl= cow group receiving physiological saline solution

\*Delta is different from 0 (*P* < 0.05)

**Table 5.** Liver mRNA expression in dairy cows infused with beta-hydroxybutyrate (HyperB) or saline (NaCl) before the start of the infusion (d0) and difference (delta: d2-d0) between before and after 48h infusion (d2). Values represent Mean  $\pm$  SEM.

Variable <sup>1</sup>	Group <sup>2</sup>	d0		Delta d2-d0		ANOVA (P-Value, group)
<i>Gluconeogenesis related variables</i>						
G6PC	HyperB	22.89	± 0.46	-0.57	± 0.50	0.44
	NaCl	21.05	± 0.49	-0.18	± 0.24	
PC	HyperB	17.42	± 0.22	0.43	± 0.08	0.87
	NaCl	17.57	± 0.13	0.48	± 0.23*	
PEPCKm	HyperB	14.60	± 0.43	0.46	± 0.29	0.18
	NaCl	14.85	± 0.20	-0.21	± 0.32	
<i>Phosphofructokinase ,liver and lactate dehydrogenase</i>						
LDHA	HyperB	16.58	± 0.22	-0.58	± 0.32	0.80
	NaCl	16.50	± 0.30	-0.45	± 0.34	
LDHB	HyperB	19.47	± 0.32	0.01	± 0.18	0.52
	NaCl	19.68	± 0.38	-0.36	± 0.45	
PFKL	HyperB	15.00	± 0.25	0.35	± 0.37	0.35
	NaCl	15.38	± 0.21	-0.22	± 0.40	
<i>Glucagon receptor, glycogen synthase, protein kinase, AMP- activated alpha 1</i>						
GCGR	HyperB	17.92	± 0.19	-0.33	± 0.24	0.91
	NaCl	16.98	± 0.56	-0.24	± 0.28	
GYS2	HyperB	19.03	± 0.28	-0.90	± 0.35	0.83
	NaCl	17.56	± 0.49	-0.57	± 0.29	
PRKAA1	HyperB	15.19	± 0.22	-0.57	± 0.30	0.08
	NaCl	14.11	± 0.36	0.11	± 0.21	
<i>Pyruvate dehydrogenase complex variables</i>						
DBT	HyperB	18.19	± 0.18	-0.09	± 0.23	0.90
	NaCl	17.64	± 0.27	-0.21	± 0.68	
DLD	HyperB	18.14	± 0.17	-0.52	± 0.31	0.84
	NaCl	17.90	± 0.14	-0.38	± 0.48	
PDHA1	HyperB	17.94	± 0.14	-0.58	± 0.46	0.53
	NaCl	18.09	± 0.17	-1.03	± 0.46*	
<i>Fatty acid and cholesterol synthesis related variables</i>						
ACOAC	HyperB	10.41	± 0.18	-0.44	± 0.34	0.64
	NaCl	8.66	± 0.51	-0.74	± 0.43	
FASN	HyperB	14.0	± 0.4	-0.8	± 0.3	0.82
	NaCl	14.0	± 0.51	-0.9	± 0.5	
HMGCS1	HyperB	20.95	± 0.24	-1.61	± 0.51*	0.69
	NaCl	18.84	± 0.46	-1.24	± 0.60*	
<i>Fatty acid oxidation related variables</i>						
ACSL	HyperB	19.76	± 0.17	0.05	± 0.19	0.65
	NaCl	18.87	± 0.49	-0.07	± 0.16	
CPT1	HyperB	14.82	± 0.22	-0.28	± 0.29	0.55
	NaCl	13.16	± 0.36	-0.09	± 0.16	
CPT2	HyperB	18.07	± 0.12	-0.33	± 0.10	0.54
	NaCl	17.19	± 0.29	-0.46	± 0.14	
<i>Citrate synthase, and ketogenesis related variables</i>						
CS	HyperB	14.48	± 0.06	-0.26	± 0.15	0.91
	NaCl	12.77	± 0.40	-0.23	± 0.20	
HMGCS2	HyperB	21.62	± 0.33	-0.23	± 0.33	0.77
	NaCl	21.14	± 0.32	-0.10	± 0.29	

<sup>1</sup>ACoAC = acetyl-CoA carboxylase; ACSL1 = acyl-CoA synthetase long-chain; CPT1A = carnitine palmitoyltransferase 1A; CPT2 = carnitine palmitoyltransferase 2; CS = citrate synthase; DBT = dihydrolipoamide branched chain transacylase E2; DLD = Dihydrolipoamide dehydrogenase; FASN= fatty acid synthase; G6PC = glucose-6-phosphatase; GCGR= glucagon receptor; GYS2= glycogen synthase 2; HMGCS1 = 3- hydroxyl-3 – methylglutaryl-coenzyme A synthase 1; HMGCS2 = 3- hydroxyl-3 – methylglutaryl-coenzyme A synthase 2 ; LDHA = lactate dehydrogenase A; LDHB = lactate dehydrogenase B; PC = pyruvate carboxylase; PDHA1 = pyruvate dehydrogenase (lipomide) alpha 1; PEPCKm = mitochondrial phosphoenolpyruvate carboxykinase; PFKL = phosphofructokinase, liver; PPKA1= protein kinase, AMP- activated alpha 1.

<sup>2</sup>HyperB= Hyper beta-hydroxybutyrate group; NaCl= cow group receiving physiological saline solution

\*Delta is different from 0 ( $P < 0.05$ )